



	DECEMBER 31, 20					
	GENERAL INFORMATION					
1.	Name CAMICLE VECCHIANELLI					
2.	Title JUSTICE OF THE PARCE					
3.	Mailing address P.O. Box 1448					
	Mailing address P.O. Box 1448 Dayrow, NV 89403					
4.	Length of residence in Nevada 39 years					
5.	County in which you are registered to vote					
6.						
	COMPENSATION FOR EXTRA-JUDICIAL ACTIVITIES					
7.	Disclose the date, place, and nature of any extra-judicial activity for which you received compensation, the name of the payor, and the amount of the compensation so received. See Canon 4I(2)(a)(ii). Attach additional sheets if necessary. Date Nature and Place of Activity Name of Payor Amount					
	INCOME					
8.	Disclose each source of income received by you and by each member of your household who is 18 years of age or older. No listing of individual clients, customers, or patients is required. Income received from such sources should be disclosed under a general heading such as "professional services." See Canon 4I(2)(a)(iii). **Attach additional sheets if necessary.** **Source of Income** **Recipient**					
	WAGES / SALANY RUSSER HARIS					
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-	WAGES / SALARY CAMILLE VECLOS.					

REAL PROPERTY

9.	Disclose the specific location, nature, and particular use of any real estate which has a fair market value of \$2,500 or more, other than your personal residence, in which you or a member of your household has a legal or beneficial interest, and is located in Nevada or any adjacent state. See Canon 4I(2)(a)(iv). Specific addresses are required – list the street address or legal description. You must designate whether the property is unimproved vacant land, agricultural land, commercial building, apartments, single-family, rental, etc. Attach additional sheets if necessary.				
	Specific Location	Nature/Particular Use	Interest Holder CAMILLE MEGGERSON A		
	15 MAINST, DAYTON WALLEY'S HOTSPRINGS	Commercial BLDG	CAMILLE VECCHIANTLY		
	WALLEY'S HOTSPRINGS	Time SHANE	CAMILLE VECCHIAREN		
		CREDITORS			
10.	Disclose the name of each creditor to who (a) the debit is secured by a mortgage or equestion 9 above, or (b) the debt is one fretained by the seller or its assignee or descent Name of Creditor	deed of trust on real property whic for which a security interest in a n signee. See Canon 4I(2)(a)(v). Att	h is not required to be listed under notor vehicle for personal use was ach additional sheets if necessary. Name of Debtor		
	CARSON RIVER BANK-E	QUITY CAMIN	LE VECCHIANELLI		
11.	List each business entity in which you or a trust, director, officer, owner (in whole or security representing one percent or more entity. See Canon 4I(2)(a)(vi). Attach add Business Entity	in part), limited or general partner, of the total outstanding stock or	or holder of any class of stock or		
	N/A				

GIFTS, BEQUESTS, FAVORS, OR LOANS

FORMATION CONTAINED I			

File this form with the State Court Administrator.

Deliver or mail to:

State Court Administrator Administrative Office of the Courts 201 S. Carson Street, Suite 250 Carson City, Nevada 89701-4702

Telephone: (775) 684-1700